

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N38485

FILED
Feb 08, 2009
Secretary of State

Entity Name: CONGREGATION BETH SHALOM OF BRANDON, INC.

Current Principal Place of Business:

706 BRYAN ROAD
BRANDON, FL 33511

New Principal Place of Business:

Current Mailing Address:

706 BRYAN ROAD
BRANDON, FL 33511

New Mailing Address:

FEI Number: 59-3026396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACOBSON, PETER A
4607 CLARKSDALE LN
BRANDON, FL 33511 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FISHMAN, SHEILA
Address: 1705 POWDER RIDGE DRIVE
City-St-Zip: VALRICO, FL 33594

Title: T () Delete
Name: JACOBSON, PETER A
Address: 4607 CLARKSDALE LANE
City-St-Zip: BRANDON, FL 33511

Title: S () Delete
Name: KOCH, TOBY
Address: 3001 SPRAWLING OAKS PL
City-St-Zip: VALRICO, FL 33594

Title: VD () Delete
Name: MILLER, ERIC N
Address: 404 APACHE TR
City-St-Zip: BRANDON, FL 33595

Title: S () Delete
Name: ROBERTS, SANDRA
Address: 2207 HERNDON ST
City-St-Zip: DOVER, FL 33527

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: FRYE, KEVIN
Address: 706 BRYAN RD
City-St-Zip: BRANDON, FL 33511

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER A JACOBSON

T

02/08/2009

Electronic Signature of Signing Officer or Director

_____ Date